



## PATIENT

Rachel Tomas

## SPECIES

Feline

## BREED

Domestic Shorthair

## SEX

Spayed female

## AGE

4 ½ years

## WEIGHT

14 lbs

## INTERPRETED BY

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

## IMAGING PERFORMED BY

Katy Borzillo

## HOSPITAL NAME

Elizbeth AH

## REFERRING VET

Dr. Allyn

## INVOICE

69752

## DATE

12/31/25

## PRESENTING CLINICAL SIGNS

History: -Came in for not eating and losing weight -Started about 2 weeks ago, and the last week she started refusing treats as well. Now is eating about 1/3-1/2 of her normal meals -Has lost weight visibly -Spent a couple of days in hiding -No vomiting or diarrhea

Abnormal PE/Chem/CBC/UA Results: PE: Weight: 13.26 lbs, down over 1 since June. All recent loss per owner. Mouth/Teeth: Mild Stage 1 dental disease UA: Urine Protein 30 mg/dL Glucose 1000 mg/dL Blood/Hemoglobin 50 Ery/µL Bilirubin 50 mg/dL Urobilinogen 8mg/dL Red Blood Cells 11/HPF CBC/Chem: Reticulocyte Hemoglobin: 14.0 pg, 14.4-19.3pg Lymphocytes 0.24 K/µL, 0.65-6.86 K/µL Monocytes 0 K/µL, 0.042-0.467 K/µL Glucose 386 mg/dL, 72 - 175 mg/dL BUN 13 mg/dL, 16 - 37 mg/dL Chloride 109 mmol/L, 114 - 126 mmol/L Anion Gap 28 mmol/L, 12 - 25 mmol/L ALT 261 U/L, 27 - 158 U/L AST 76 U/L, 16 - 67 U/L ALP 151 U/L, 12 - 59 U/L Bilirubin - Total 1.1 mg/dL, 0.0 - 0.3 mg/dL Bilirubin - Unconjugated 0.4 mg/dL, 0.0 - 0.2 mg/dL Bilirubin - Conjugated 0.7 mg/dL, 0.0 - 0.2 mg/dL

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### Urinary System

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction and appeared normal. The ureters were not visible which is normal. No uroliths or sediment were visualized and anechoic urine was present. No evidence of inflammatory or neoplastic changes was noted. Ureteral papillae were normal.

The **kidneys** revealed normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The left kidney measured 4.53 cm. The right kidney measured 4.76 cm.

### Adrenal Glands

Both **adrenal glands** were visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were unremarkable. Capsule, cortex, and medullary definition were normal for this age patient. The left adrenal gland measured 0.3 cm. The right adrenal gland measured 0.3 cm.

### Spleen

The **spleen** presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. The capsule was smooth without noticeable expansion or deviation from within the spleen or adjacent pathology. The splenic vasculature demonstrated normal volume without signs of congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarctual changes was noted.



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## Liver

The **liver** was diffusely hyperechoic to the falciform fat. The gallbladder and common bile duct were unremarkable.

## Gastrointestinal

Examination of the **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. Small and large intestine demonstrated normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

## Pancreas

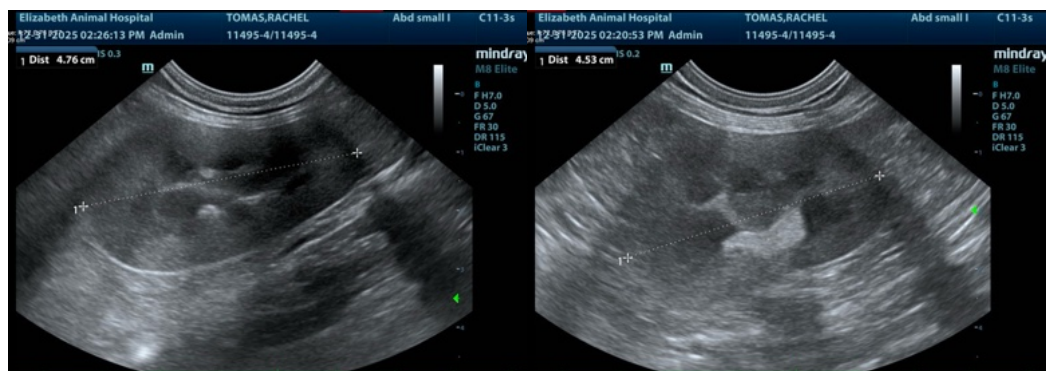
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

## ULTRASONOGRAPHIC FINDINGS

Hepatic lipidosis pattern, likely underlying inflammatory component.

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is a mild potential for underlying neoplasia. Ultrasound-guided FNA after coagulation panel is indicated to ensure that lipidosis is the underlying issue.





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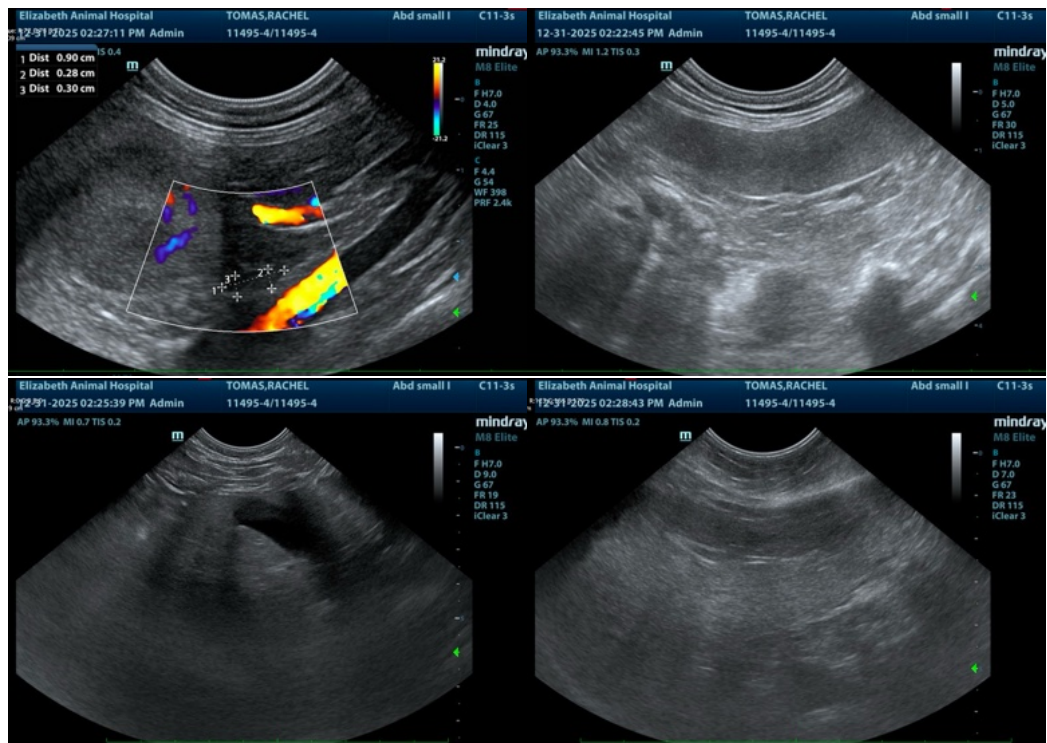
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

Eric Lindquist, DMV, DABVP (CFM), Cert. IVUSS, CEO of SonoPath.com

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